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CONFIRMATION NO. 6368

<b>SERIAL NUMBER</b> 10/799,362	<b>FILING OR 371(c) DATE</b> 03/12/2004 <b>RULE</b>	<b>CLASS</b> 137	<b>GROUP ART UNIT</b> 3753	<b>ATTORNEY DOCKET NO.</b> GRTSTF.031A
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/455,229 03/13/2003

*Verification***\*\* FOREIGN APPLICATIONS \*\*\*\*\****None**Class*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 05/27/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 40	<b>INDEPENDENT CLAIMS</b> 13
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Class</i> Initials <i>cl</i>				

**ADDRESS**

20995

**TITLE**

Remote control for hose operation

<b>FILING FEE RECEIVED</b> 1060	FEES: Authority has been given in Paper. No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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